DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

Docket Number	
MP1734-US2	_

My residence, post office address, and citizenship are stated below next to my name.

l believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

	PTC DEVICE AND N		NG SUCH	DEVI	CE			
he specification of which is attached	d hereto unless the followin	g box is checked:						
was filed on Number	as Unite	nber or PCT	or PCT International Application (if applicable).					
hereby state that I have reviewed a mended by any amendment referre	d to above.							
acknowledge the duty to disclose i Regulations, §1.56.	nformation which is materia	al to patentability as defin	ned in Title 37	, Code o	of Feder	al		
hereby claim foreign priority bene nventor's certificate listed below an	nd have also identified below	w any foreign application						
ling date before that of the application on which priority is claimed. or Foreign Application(s)			Prio	Priority Claimed				
			🗆	Yes		No		
(Number)	(Country)	(Day/Month/Year File	:d)	Yes	П	No		
(Number)	(Country)	(Day/Month/Year File	:d)	Yes	\Box	No		
(Number)	(Country)	(Day/Month/Year File	ed)	Yes		No		
(Number)	(Country)	(Day/Month/Year File	ed)		ب			
hereby claim the benefit under Titl	le 35, United States Code, §	119(e) of any United Stat	tes provisiona	l applica	tions li	sted below.		
60/411,481	09/17/02							
(Application Number)	(Filing Date)							
(Application Number)	(Filing Date)							
(Application Number)	(Filing Date)							
(Application Number)	(Filing Date)							
hereby claim the benefit under Tities the subject matter of each of the corovided by the first paragraph of T material to patentability as defined id the prior application and the	claims of this application is litle 35, United States Code, n Title 37, Code of Federal	not disclosed in the prior §112, I acknowledge the Regulations, §1.56 which	United States duty to discl became ava	applica	tion in t mation	the manner which is		
(Application Number)	(Filing Da	te) (Stat	us — patente	s — patented, pending, abandoned)				
(Application Number)	(Filing Da	te) (Stat	(Status — patented, pending, abandoned)					
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(Application Number)	(Filing Da	te) (Stat	(Status — patented, pending, abandoned)					

DECLARATION FOR PATENT APPLICATION (continued)

Docket Number

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I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Marguerite E. Gerstner (Reg. No. 32,695) Sheri M. Novack (Reg. No. 32,526) Michael J. Aronoff (Reg. No. 37,770)

Address all telephone and all correspondence		Marguerite E. Gerstner, t Tyco Electronics Corporat Intellectual Property Law I 307 Constitution Drive, MS Menlo Park, CA 94025-116	ion Dept. S R20/2B	2483				
belief are believed to be to like so made are punishab	rue, and further t le by fine or imp	nerein of my own knowledge are hat these statements are made wi orisonment, or both, under Section ze the validity of the application	th the knowledge that in 1001 of Title 18 of	willful false statements and the the United States Code and that				
Full name of sole or fi	rst inventor (giy	en name, family name)	Ann Banich					
Inventor's signature	annt	Samich	Date	8/29/03				
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Full name of second jo	oint inventor, if a	iny (given name, family name)	Cecilia A. Wals	h				
Inventor's signature	0.0.	01.92	Date	9/2/7				
Citizenship	United Stat	es es		112162				
Residence		lale Avenue, Los Altos, Calif	fornia 94024. Unite	d States of America				
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Full name of third join	nt inventor, if any	y (given name, family name)						
Inventor's signature			Date					
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Residence								
Post Office Address	Same as at	ove						
Full name of fourth jo	int inventor, if a	ny (given name, family name)						
Inventor's signature			Date					
Citizenship								
Residence								
Post Office Address	Same as at	oove						
Full name of fifth join	t inventor, if any	(given name, family name)						
Inventor's signature			Date					
Citizenship								
Residence								
Post Office Address	Same as at	ove						
Additional invento	rs are being nam	ed on separately numbered sheet	s attached hereto.					
==	-	ich priority benefits are claimed		a)-(d), 119(e) and/or 120 are				

identified on a sheet attached hereto.